



DOCKET NO. MCP5018

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Oliver B. Anderson, et al.

Serial No.: 10/677,984

Art Unit: 3721

Filed : October 2, 2003

Examiner: Not yet assigned

For : ZERO CYCLE MOLDING SYSTEMS, METHODS AND APPARATUSES FOR
MANUFACTURING DOSAGE FORMS

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January 30, 2004

(Date of Deposit)

DAVID R. CRICHTON

(Name of applicant, assignee, or Registered Representative)

(Signature)

January 30, 2004

(Date of Signature)

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SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a
Combined Declaration and Power of Attorney for the application of
Oliver B. Anderson, et al., entitled ZERO CYCLE MOLDING SYSTEMS,
METHODS AND APPARATUSES FOR MANUFACTURING DOSAGE FORMS, Attorney
Docket No. MCP5018, to complete, pursuant to Rule 51, this application
filed on October 2, 2003 by Express Mail pursuant to Rule 10. As
required, a copy of the Notice to File Missing Parts of Application
is also attached.

Please charge Johnson & Johnson Deposit Account No.
10-0750/MCP5018/DRC in the amounts of \$130.00 for submission of the
Declaration pursuant to Section 1.16(e). The Commissioner is hereby
authorized to charge any additional fees which may be required, or
credit any overpayment to Account No. 10-0750/MCP5018/DRC. This
sheet is submitted in triplicate.

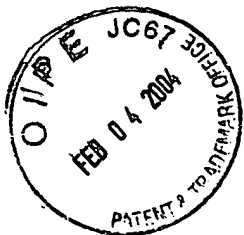
Respectfully submitted,

DAVID R. CRICHTON

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Attorney for Applicant(s)

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(732) 524-6131
Date: January 30, 2004



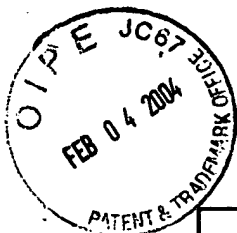
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PTO/SB/01 (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after OR Initial Filing (Surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	MCP 5018			
	First Named Inventor	ANDERSON, OLIVER B.			
	COMPLETE IF KNOWN				
	Application Number	10/677,984			
	Filing Date	October 2, 2003			
	Group Art Unit	3721			
	Examiner Name	Not yet assigned			
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: ZERO CYCLE MOLDING SYSTEMS, METHODS AND APPARATUSES FOR MANUFACTURING DOSAGE FORMS (Title of the Invention) the specification of which <input checked="" type="checkbox"/> is attached hereto OR <input type="checkbox"/> was filed on (MM/DD/YYYY) <input type="text"/> as United States Application Number or PCT International Application Number <input type="text"/> and was amended on (MM/DD/YYYY) <input type="text"/> I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO	
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:



DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

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☐ Practitioner(s) named below:
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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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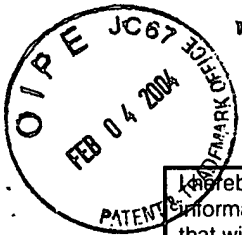
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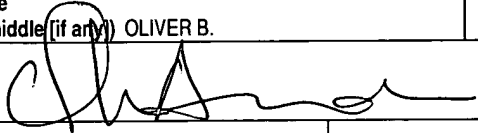
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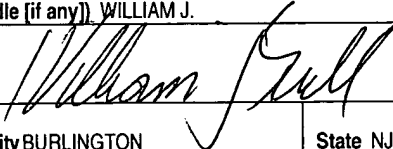
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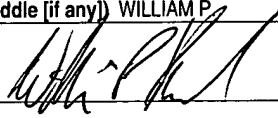
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

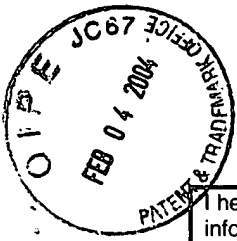
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) OLIVER B.		Family Name or Surname ANDERSON	
Inventor's Signature 		Date 20 JAN 04	
Residence: City WILLOW GROVE	State PA	Country USA	Citizenship USA
Mailing Address 3505 MORELAND ROAD			
City WILLOW GROVE	State PA	ZIP 19090	Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) WILLIAM J.		Family Name or Surname STUHL	
Inventor's Signature 		Date 1-29-04	
Residence: City BURLINGTON	State NJ	Country USA	Citizenship USA
Mailing Address 13 GREEN BRIAR COURT			
City BURLINGTON	State NJ	ZIP 08016	Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) WILLIAM P.		Family Name or Surname BUCKLEMAN	
Inventor's Signature 		Date 27 JAN 04	
Residence: City HORSHAM WARMINSTER	State PA	Country USA	Citizenship USA
Mailing Address 213 MAPLE AVE 108 Belair Rd. (BAG)			
City WARMINSTER HORSHAM	State PA	ZIP 18974 19044	Country USA



I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) HARRY S.

Family Name
or Surname SOWDEN

Inventor's
Signature

Date

1/20/04

Residence: City GLENSIDE

State PA

Country USA

Citizenship USA

Mailing Address 209 WOODS ROAD

City GLENSIDE

State PA

ZIP 19038

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

Family Name
or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

Family Name
or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country